

## STATE OF NEW HAMPSHIRE

Filing fee: \$15.00  
Use black print or type.

Form No. 3

## NOTICE OF TRANSFER OF RESERVED NAME OF

TO THE SECRETARY OF STATE OF THE STATE OF NEW HAMPSHIRE

PURSUANT TO THE PROVISIONS OF THE NEW HAMPSHIRE REVISED STATUTES ANNOTATED,  
YOU ARE HEREBY NOTIFIED THAT THE UNDERSIGNED HAS TRANSFERRED TO \_\_\_\_\_  
\_\_\_\_\_ WHOSE ADDRESS IS \_\_\_\_\_  
\_\_\_\_\_ THE ABOVE NAME WHICH WAS RESERVED IN YOUR  
OFFICE FOR THE EXCLUSIVE USE OF THE UNDERSIGNED ON \_\_\_\_\_,  
FOR A PERIOD OF ONE HUNDRED TWENTY DAYS THEREAFTER.

Dated \_\_\_\_\_, \_\_\_\_\_

(Note 1)

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(City/Town) (State) (Zip Code)

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(Email Address)

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(Phone Number)

Signature \_\_\_\_\_ Its \_\_\_\_\_ (Note 2)

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Print or type name

**Notes:** 1. Enter name of individual or name of business entity in whose name certificate of reservation was issued and address.  
2. Signature of applicant for whom the name was reserved.

Mail fee with ONE ORIGINAL and ONE EXACT OR CONFORMED COPY to: Corporation  
Division, Department of State, 107 N Main St., Concord, NH 03301-4989